

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2016	07/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	NODI C		*****	*****	*****	*****			
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	NODI C	*****	NODI C				
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI C	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI C	NODI C				
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI C	NODI C				
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI C	NODI C				
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/8/04/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

There was no stormwater discharge from the Terminal during the month of July 2016.

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(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	NODI C		*****	*****	*****	*****			
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Terminal Compliance Manager			(978)905-2228		08/04/2016
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	278	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.5	*****	7.5	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	8.9	8.9	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .99	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .05	< .05	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	.028	.056	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/9/09/2016	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

There was only one stormwater discharge event at this facility in August 2016, therefore only one TSS sample was collected for this month. Naphthalene is reported as both a VOC and SVOC per the Permit.

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TREATED STORMWATER & HYDROSTATIC
External Outfall
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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.172	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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External Outfall

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	200	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.23	*****	7.23	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	11	11	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.01	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .052	< .052	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

There was only one discharge event during the month of September 2016, therefore, only one TSS sample was collected. Naphthalene is reported as both a VOC and SVOC per the Permit.

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(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.108	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 200	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia, unionized	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.36	mg/L		Quarterly	Grab
00619 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chromium, total [as Cr]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.22	ug/L		Quarterly	Grab
01034 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.8	ug/L		Quarterly	Grab
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34200 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34200 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34205 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34205 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34220 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34230 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34230 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		0/14/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2016	09/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34242 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34242 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34247 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34320 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34320 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		0/14/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2016	09/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATER
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34376 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34376 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34381 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34381 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34403 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34403 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		0/14/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2016	09/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34461 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.061	ug/L		Quarterly	Grab
34461 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34469 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34469 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34521 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34521 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34526 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		0/14/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2016	09/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34526 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .052	ug/L		Quarterly	Grab
34556 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.02	ug/L		Quarterly	Grab
34694 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.108	ug/L		Quarterly	Grab
34696 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
37371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		0/14/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2016	09/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATER
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Vinyl chloride	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
39175 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
tert-Butyl alcohol [TBA]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	ug/L		Quarterly	Grab
51008 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	10	CFU/100 mL		Quarterly	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	CFU/100 mL		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228	0/14/2016
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2016	09/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.23	SU		Quarterly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.84	SU		Quarterly	Grab
00400 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.2	ppt		Quarterly	Grab
00480 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	28.1	ppt		Quarterly	Grab
00480 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7400	mg/L		Quarterly	Grab
00500 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	34100	mg/L		Quarterly	Grab
00500 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	11	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		0/14/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

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FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2016	09/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	11.1	mg/L		Quarterly	Grab
00530 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.36	mg/L		Quarterly	Grab
00609 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.21	mg/L		Quarterly	Grab
00609 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.03	mg/L		Quarterly	Grab
00680 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.17	mg/L		Quarterly	Grab
00680 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .06	ug/L		Quarterly	Grab
01027 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .15	ug/L		Quarterly	Grab
01027 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		0/14/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2016	09/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	10.5	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	30.4	ug/L		Quarterly	Grab
01042 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.89	ug/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .53	ug/L		Quarterly	Grab
01051 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5.09	ug/L		Quarterly	Grab
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.31	ug/L		Quarterly	Grab
01067 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.43	ug/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		0/14/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2016	09/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL ()
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	19.7	ug/L		Quarterly	Grab
01092 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	mg/L		Quarterly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	mg/L		Quarterly	Grab
50060 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
LC50 Static 48Hr Acute Mysid. Bahia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA3E 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab
LC50 Static 48Hr Acute Menidia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA6B 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228	0/14/2016
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	10/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	100	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	7.6	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.9	1.9	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .051	< .051	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		1/11/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one discharge event during the month of October 2016, therefore, only one TSS sample was collected.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	10/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.303	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Terminal Compliance Manager			(978)905-2228		1/11/2016
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
11/01/2016	11/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	273	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	6.74	*****	6.74	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	10.3	10.3	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .051	< .051	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		2/15/2016	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one discharge event during the month of November 2016, therefore, only one TSS sample was collected.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
11/01/2016	11/30/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.246	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Terminal Compliance Manager			(978)905-2228		2/15/2016
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	335	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	7.6	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	42.95	79.7	mg/L	1	Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .051	< .051	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		11/12/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. Two TSS samples were collected in December 2016. The first sample collected on 12/5/16 had TSS of 79.7 mg/L, the second sample collected on 12/28/16 had TSS of 6.2 mg/L, resulting in a monthly average of 42.95 mg/L. Gulf believes the TSS was elevated on 12/5/16 because the stormwater retention ponds had recently been cleaned out and there was not enough time before the next discharge and sampling to allow for settling once the ponds were refilled. By the end of the month, the TSS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.87	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Terminal Compliance Manager			(978)905-2228		11/12/201
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. Two TSS samples were collected in December 2016. The first sample collected on 12/5/16 had TSS of 79.7 mg/L, the second sample collected on 12/28/16 had TSS of 6.2 mg/L, resulting in a monthly average of 42.95 mg/L. Gulf believes the TSS was elevated on 12/5/16 because the stormwater retention ponds had recently been cleaned out and there was not enough time before the next discharge and sampling to allow for settling once the ponds were refilled. By the end of the month, the TSS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
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Form Approved
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CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 200	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manager			(978)905-2228		11/12/201
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
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CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia, unionized	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	mg/L		Quarterly	Grab
00619 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chromium, total [as Cr]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.22	ug/L		Quarterly	Grab
01034 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34200 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manger		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		11/12/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

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10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34200 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34205 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34205 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34220 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34230 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34230 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manger		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		11/12/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

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Form Approved
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MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34242 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34242 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34247 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34320 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34320 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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MA0001091	003-Q
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MM/DD/YYYY	MM/DD/YYYY
10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATER
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.056	ug/L		Quarterly	Grab
34376 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34376 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34381 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34381 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34403 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34403 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manger		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		11/12/201	
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MA0001091	003-Q
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MM/DD/YYYY	MM/DD/YYYY
10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATER
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34461 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34461 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.072	ug/L		Quarterly	Grab
34469 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34469 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34521 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34521 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34526 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Form Approved
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MA0001091	003-Q
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MONITORING PERIOD	
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DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34526 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34556 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .993	ug/L		Quarterly	Grab
34694 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
37371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manger		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		11/12/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATER
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Vinyl chloride	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
39175 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
tert-Butyl alcohol [TBA]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	ug/L		Quarterly	Grab
51008 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	34	CFU/100 mL		Quarterly	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	CFU/100 mL		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Terminal Compliance Manger		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228	11/12/201
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.6	SU		Quarterly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.09	SU		Quarterly	Grab
00400 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ppt		Quarterly	Grab
00480 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	19.1	ppt		Quarterly	Grab
00480 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	248	mg/L		Quarterly	Grab
00500 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	22600	mg/L		Quarterly	Grab
00500 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	79.7	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		11/12/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	42.2	mg/L		Quarterly	Grab
00530 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	mg/L		Quarterly	Grab
00609 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	mg/L		Quarterly	Grab
00609 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.57	mg/L		Quarterly	Grab
00680 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.92	mg/L		Quarterly	Grab
00680 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .3	ug/L		Quarterly	Grab
01027 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .3	ug/L		Quarterly	Grab
01027 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		11/12/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	15.2	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	82.7	ug/L		Quarterly	Grab
01042 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	47.9	ug/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	15	ug/L		Quarterly	Grab
01051 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7	ug/L		Quarterly	Grab
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 2.2	ug/L		Quarterly	Grab
01067 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	88.9	ug/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		11/12/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	12/31/2016

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL ()
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	44.6	ug/L		Quarterly	Grab
01092 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .028	mg/L		Quarterly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .028	mg/L		Quarterly	Grab
50060 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
LC50 Static 48Hr Acute Mysid. Bahia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA3E 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab
LC50 Static 48Hr Acute Menidia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA6B 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228	11/12/201
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2017	01/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	478	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.33	*****	7.33	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	11	12.5	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.5	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .052	< .052	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/2/14/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2017	01/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.84	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Terminal Compliance Manager			(978)905-2228		12/14/201
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
02/01/2017	02/28/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	482	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.68	*****	7.68	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	4.4	6.8	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.01	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .051	< .051	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/3/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
02/01/2017	02/28/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.78	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Terminal Compliance Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2228	3/13/2017
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
03/01/2017	03/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	328	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.21	*****	7.21	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	25	25	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .07	< .07	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/4/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one discharge event during the month, therefore, only one TSS sample was collected

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
03/01/2017	03/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.984	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health			(978)905-2228		14/13/201
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one discharge event during the month, therefore, only one TSS sample was collected

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2017	03/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 200	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		14/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2017	03/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia, unionized	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.42	mg/L		Quarterly	Grab
00619 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chromium, total [as Cr]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.79	ug/L		Quarterly	Grab
01034 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34200 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/4/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2017	03/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34200 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34205 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34205 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34220 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34230 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34230 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/4/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2017	03/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATER
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34242 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34242 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34247 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34320 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34320 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/4/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2017	03/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34376 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34376 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34381 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34381 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34403 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34403 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34461 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34461 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34469 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34469 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34521 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34521 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34526 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/4/13/201	
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DISCHARGE MONITORING REPORT (DMR)

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MA0001091	003-Q
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DMR Mailing ZIP CODE: 02481-3705
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(SUBR E)
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External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34526 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .07	ug/L		Quarterly	Grab
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Quarterly	Grab
34556 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.38	ug/L		Quarterly	Grab
34694 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
37371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/4/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

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MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
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01/01/2017	03/31/2017

DMR Mailing ZIP CODE: 02481-3705
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External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Vinyl chloride	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
39175 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
tert-Butyl alcohol [TBA]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	ug/L		Quarterly	Grab
51008 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	CFU/100 mL		Quarterly	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	CFU/100 mL		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228	4/13/2017
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2017	03/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.21	SU		Quarterly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.91	SU		Quarterly	Grab
00400 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.7	ppt		Quarterly	Grab
00480 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	28.8	ppt		Quarterly	Grab
00480 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1940	mg/L		Quarterly	Grab
00500 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	32800	mg/L		Quarterly	Grab
00500 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	25	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab

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DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	13.5	mg/L		Quarterly	Grab
00530 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.42	mg/L		Quarterly	Grab
00609 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	mg/L		Quarterly	Grab
00609 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5.58	mg/L		Quarterly	Grab
00680 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.39	mg/L		Quarterly	Grab
00680 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .4	ug/L		Quarterly	Grab
01027 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 2	ug/L		Quarterly	Grab
01027 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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MA0001091	003-T
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MINOR
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QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.2	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	97.2	ug/L		Quarterly	Grab
01042 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.5	ug/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 17.1	ug/L		Quarterly	Grab
01051 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 4.4	ug/L		Quarterly	Grab
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 5	ug/L		Quarterly	Grab
01067 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	39.3	ug/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228		/4/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2017	03/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL ()
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 13.6	ug/L		Quarterly	Grab
01092 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.079	mg/L		Quarterly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.034	mg/L		Quarterly	Grab
50060 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
LC50 Static 48Hr Acute Mysid. Bahia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA3E 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab
LC50 Static 48Hr Acute Menidia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA6B 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2228	4/13/2017
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2017	04/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	427	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.13	*****	7.13	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	5.1	11	mg/L		Three per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .051	< .051	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/22/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2017	04/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.68	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		05/22/2017
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2017	05/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	322	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.25	*****	9.16	SU	1	Twice per Month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	9	9.8	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .051	< .051	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	.038	.076	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/6/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2017	05/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.56	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	6/13/201
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2017	06/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	341	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.79	*****	8.01	SU		Twice per Month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	7	10.3	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.5	mg/L		Twice per Month	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Twice per Month	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .05	< .05	ug/L		Twice per Month	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Twice per Month	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/8/04/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The lab report for the 6/27/17 samples is being finalized by the lab and will be uploaded once it is issued.UPDATE: The final lab report for the 6/27/17 samples has been attached to this updated DMR.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150
ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2017	06/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall
No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.09	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health			(978)905-2100		8/04/2017
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The lab report for the 6/27/17 samples is being finalized by the lab and will be uploaded once it is issued.UPDATE: The final lab report for the 6/27/17 samples has been attached to this updated DMR.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150
ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2017	06/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 200	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health			(978)905-2100		08/04/2017
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

The lab report for the 6/27/17 samples is being finalized by the lab and will be uploaded once it is issued.UPDATE: The final lab report for the 6/27/17 samples has been attached to this updated DMR.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2017	06/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia, unionized	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.26	mg/L		Quarterly	Grab
00619 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chromium, total [as Cr]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	13.3	ug/L		Quarterly	Grab
01034 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34200 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34200 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34205 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34205 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34220 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34230 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34230 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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External Outfall

No Discharge ☐

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34242 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34242 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34247 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34320 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34320 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34376 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34376 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34381 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34381 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34403 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34403 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34461 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34461 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34469 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34469 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34521 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34521 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34526 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34526 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Quarterly	Grab
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34556 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .645	ug/L		Quarterly	Grab
34694 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
37371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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ATTN: Christopher Gill, Terminal Mgr

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Vinyl chloride	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
39175 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
tert-Butyl alcohol [TBA]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	ug/L		Quarterly	Grab
51008 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	124	CFU/100 mL		Quarterly	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	CFU/100 mL		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	8/04/2017
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Lab analysis for all metals are in progress, equipment issues delayed receiving results. The DMR will be resubmitted with these results when they are received from the lab. Naphthalene is reported as both a VOC and SVOC per the Permit.UPDATE: The final lab report for the 6/27/17 samples has been attached to this updated DMR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2017	06/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.01	SU		Quarterly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.92	SU		Quarterly	Grab
00400 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ppt		Quarterly	Grab
00480 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	24.6	ppt		Quarterly	Grab
00480 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	488	mg/L		Quarterly	Grab
00500 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	29000	mg/L		Quarterly	Grab
00500 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	10.3	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

Form Approved
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MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2017	06/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9	mg/L		Quarterly	Grab
00530 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.26	mg/L		Quarterly	Grab
00609 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.1	mg/L		Quarterly	Grab
00609 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.18	mg/L		Quarterly	Grab
00680 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.28	mg/L		Quarterly	Grab
00680 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	ug/L		Quarterly	Grab
01027 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.19	ug/L		Quarterly	Grab
01027 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2017	06/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 25	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	194	ug/L		Quarterly	Grab
01042 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.7	ug/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.84	ug/L		Quarterly	Grab
01051 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4.5	ug/L		Quarterly	Grab
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	16.6	ug/L		Quarterly	Grab
01067 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	11	ug/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2017	06/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	20.9	ug/L		Quarterly	Grab
01092 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.066	mg/L		Quarterly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.028	mg/L		Quarterly	Grab
50060 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
LC50 Static 48Hr Acute Mysid. Bahia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA3E 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab
LC50 Static 48Hr Acute Menidia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA6B 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	8/04/2017
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2017	07/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	328	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	6.2	*****	6.2	SU	1	Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	51.8	91.7	mg/L	1	Three per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .049	< .049	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The non-compliance for pH and TSS this month were likely due to maintenance activities being performed on the stormwater system during the month. The sediments within the trench drains around the loading rack were cleaned (work started the week of July 10). The data shows that the TSS concentrations improved later in the month and were at 3.3 mg/L in the 7/27/2017 sample.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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MA0001091	003-A
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07/01/2017	07/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	2.08	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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08/01/2017	08/31/2017

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MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	316	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	8.26	*****	8.26	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	8.4	14.2	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .257	< .257	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/9/15/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. For benzo[a]pyrene, the lab reported interferences present in the sample resulting in an increased reporting limit that was greater than the Permit Limit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
08/01/2017	08/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.779	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		09/15/2017
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. For benzo[a]pyrene, the lab reported interferences present in the sample resulting in an increased reporting limit that was greater than the Permit Limit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2017	09/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	291	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.08	*****	7.08	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	3.2	3.2	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.5	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .047	< .047	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one discharge event during the month, therefore, only one TSS sample was collected.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2017	09/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.576	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Dir Environment, Safety, Occupat. Health			(978)905-2100		0/13/201
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one discharge event during the month, therefore, only one TSS sample was collected.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2017	09/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 200	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2017	09/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia, unionized	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.5	mg/L		Quarterly	Grab
00619 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chromium, total [as Cr]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 5.6	ug/L		Quarterly	Grab
01034 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34200 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
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CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2017	09/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34200 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34205 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34205 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34220 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34230 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34230 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2017	09/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34242 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34242 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34247 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34320 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34320 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
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Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
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MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2017	09/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATER
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34376 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34376 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34381 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34381 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34403 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34403 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/13/201	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2017	09/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34461 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34461 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34469 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34469 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34521 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34521 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34526 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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ATTN: Christopher Gill, Terminal Mgr

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External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34526 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .257	ug/L		Quarterly	Grab
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .049	ug/L		Quarterly	Grab
34556 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .639	ug/L		Quarterly	Grab
34694 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
37371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Vinyl chloride	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
39175 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
tert-Butyl alcohol [TBA]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	ug/L		Quarterly	Grab
51008 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	45	CFU/100 mL		Quarterly	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	CFU/100 mL		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	0/13/201
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2017	09/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.26	SU		Quarterly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.12	SU		Quarterly	Grab
00400 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ppt		Quarterly	Grab
00480 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	27.8	ppt		Quarterly	Grab
00480 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	250	mg/L		Quarterly	Grab
00500 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	38500	mg/L		Quarterly	Grab
00500 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	14.2	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab

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LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
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MM/DD/YYYY	MM/DD/YYYY
07/01/2017	09/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	24.8	mg/L		Quarterly	Grab
00530 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.5	mg/L		Quarterly	Grab
00609 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.18	mg/L		Quarterly	Grab
00609 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5.86	mg/L		Quarterly	Grab
00680 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.7	mg/L		Quarterly	Grab
00680 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	ug/L		Quarterly	Grab
01027 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	ug/L		Quarterly	Grab
01027 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5.6	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.1	ug/L		Quarterly	Grab
01042 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8	ug/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 2.2	ug/L		Quarterly	Grab
01051 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 4	ug/L		Quarterly	Grab
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .55	ug/L		Quarterly	Grab
01067 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 17	ug/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 6.4	ug/L		Quarterly	Grab
01092 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.025	mg/L		Quarterly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	mg/L		Quarterly	Grab
50060 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
LC50 Static 48Hr Acute Mysid. Bahia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA3E 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab
LC50 Static 48Hr Acute Menidia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA6B 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	0/13/201
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	10/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	321	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.95	*****	7.95	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	7.4	7.4	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.5	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .048	< .048	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		1/14/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The second discharge event was not a qualifying event free from tidal influence, therefore, only one TSS sample was collected during the month.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	10/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.811	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		1/14/201
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The second discharge event was not a qualifying event free from tidal influence, therefore, only one TSS sample was collected during the month.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
11/01/2017	11/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	313	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.37	*****	7.37	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.9	2.9	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.5	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .049	< .049	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		2/12/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one discharge event during the month, therefore, only one TSS sample was collected.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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ADDRESS: 281 EASTERN AVE
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FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
11/01/2017	11/30/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.441	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health			(978)905-2100		2/12/201
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
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OMB No. 2040-0004

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CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	185	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.16	*****	7.16	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	14.4	14.4	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .047	< .047	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one discharge event during the month, therefore, only one TSS sample was collected.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.168	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health			(978)905-2100		11/12/2018
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one discharge event during the month, therefore, only one TSS sample was collected.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 200	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		11/12/2018
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia, unionized	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.23	mg/L		Quarterly	Grab
00619 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chromium, total [as Cr]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 1.6	ug/L		Quarterly	Grab
01034 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34010 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34030 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34200 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34200 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34205 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34205 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34220 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34230 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34230 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/12/2018	
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Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
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(SUBR E)
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External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34242 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34242 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34247 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34320 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34320 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34371 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34376 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34376 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34381 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34381 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34403 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34403 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/12/2018
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34461 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34461 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34469 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34469 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34521 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34521 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34526 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/12/2018	
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
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CHELSEA, MA 02150

MA0001091	003-Q
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34526 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .048	ug/L		Quarterly	Grab
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .046	ug/L		Quarterly	Grab
34556 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Phenol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .62	ug/L		Quarterly	Grab
34694 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
34696 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
37371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
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MA0001091	003-Q
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DMR Mailing ZIP CODE: 02481-3705
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QUARTERLY EFFLUENT & RECEIVING WATE
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Vinyl chloride	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
39175 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
tert-Butyl alcohol [TBA]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	ug/L		Quarterly	Grab
51008 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	850	CFU/100 mL		Quarterly	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	CFU/100 mL		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Quarterly	Grab
81551 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
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MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.95	SU		Quarterly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.64	SU		Quarterly	Grab
00400 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ppt		Quarterly	Grab
00480 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	26.1	ppt		Quarterly	Grab
00480 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	120	mg/L		Quarterly	Grab
00500 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	47800	mg/L		Quarterly	Grab
00500 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.4	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	15	mg/L		Quarterly	Grab
00530 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.23	mg/L		Quarterly	Grab
00609 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.17	mg/L		Quarterly	Grab
00609 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4.64	mg/L		Quarterly	Grab
00680 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.37	mg/L		Quarterly	Grab
00680 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .095	ug/L		Quarterly	Grab
01027 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 2	ug/L		Quarterly	Grab
01027 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5.4	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	110	ug/L		Quarterly	Grab
01042 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4	ug/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 25	ug/L		Quarterly	Grab
01051 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 1.8	ug/L		Quarterly	Grab
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 50	ug/L		Quarterly	Grab
01067 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 10	ug/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL ()
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 200	ug/L		Quarterly	Grab
01092 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.043	mg/L		Quarterly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	mg/L		Quarterly	Grab
50060 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
LC50 Static 48Hr Acute Mysid. Bahia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA3E 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab
LC50 Static 48Hr Acute Menidia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA6B 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	11/12/2018
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2018	01/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	412	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	6.63	*****	6.73	SU		Twice per Month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	19.9	25.8	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.8	mg/L		Twice per Month	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.4	1.6	ug/L		Twice per Month	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< .047	ug/L		Twice per Month	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	.72	2	ug/L		Twice per Month	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/2/15/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2018	01/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.26	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		12/15/2018
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
02/01/2018	02/28/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	331	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	6	*****	7.58	SU	1	Twice per Month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	17.4	17.8	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.02	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.2	1.2	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .047	< .047	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	.048	.095	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/3/15/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The initial pH result from 2/7/2018 was below the permit lower limit of 6.5. A second pH sample was collected on 2/27/2018 and the result was within the permit limits. The original pH result was likely an anomaly.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
02/01/2018	02/28/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.09	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	3/15/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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03/01/2018	03/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	401	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.55	*****	7.55	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	24.7	68.5	mg/L		Four per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .049	< .049	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/4/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
03/01/2018	03/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.24	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	04/12/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2018	03/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 200	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		04/12/2018
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2018	03/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6	SU		Quarterly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.67	SU		Quarterly	Grab
00400 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ppt		Quarterly	Grab
00480 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	22.2	ppt		Quarterly	Grab
00480 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1100	mg/L		Quarterly	Grab
00500 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	28300	mg/L		Quarterly	Grab
00500 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	17.8	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/4/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Analysis for additional parameters from the effluent and the receiving water were conducted during the quarterly monitoring event, and the results are included in the attached laboratory report.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2018	03/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	10.3	mg/L		Quarterly	Grab
00530 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.48	mg/L		Quarterly	Grab
00609 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.21	mg/L		Quarterly	Grab
00609 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.92	mg/L		Quarterly	Grab
00680 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.54	mg/L		Quarterly	Grab
00680 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .23	ug/L		Quarterly	Grab
01027 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.55	ug/L		Quarterly	Grab
01027 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2018	03/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL I
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.8	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.3	ug/L		Quarterly	Grab
01042 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.8	ug/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 2.7	ug/L		Quarterly	Grab
01051 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.5	ug/L		Quarterly	Grab
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 1.1	ug/L		Quarterly	Grab
01067 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	65.4	ug/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/4/12/2018	
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Analysis for additional parameters from the effluent and the receiving water were conducted during the quarterly monitoring event, and the results are included in the attached laboratory report.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2018	03/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY TOXICITY TESTING OUTFALL ()
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 13.2	ug/L		Quarterly	Grab
01092 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	mg/L		Quarterly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	mg/L		Quarterly	Grab
50060 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	Grab
LC50 Static 48Hr Acute Mysid. Bahia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA3E 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab
LC50 Static 48Hr Acute Menidia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Quarterly	Grab
TAA6B 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	4/12/2018
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Analysis for additional parameters from the effluent and the receiving water were conducted during the quarterly monitoring event, and the results are included in the attached laboratory report.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2018	04/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	302	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.66	*****	7.66	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	12.75	15.3	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .28	< .28	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	E .074	E .074	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	E .39	E .78	ug/L		Twice per Month	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2018	04/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.54	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health			(978)905-2100		05/15/2018
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2018	04/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia, unionized	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.42	mg/L		Annual	Grab
00619 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Chromium, total [as Cr]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E 1.6	ug/L		Annual	Grab
01034 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .3	ug/L		Annual	Grab
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34010 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .28	ug/L		Annual	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34030 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .012	ug/L		Annual	Grab
34200 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Envrionment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2018	04/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Annual	Grab
34200 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .007	ug/L		Annual	Grab
34205 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Annual	Grab
34205 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .044	ug/L		Annual	Grab
34220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Annual	Grab
34220 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .075	ug/L		Annual	Grab
34230 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.056	ug/L		Annual	Grab
34230 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Envrionment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2018	04/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .072	ug/L		Annual	Grab
34242 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.062	ug/L		Annual	Grab
34242 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .074	ug/L		Annual	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.064	ug/L		Annual	Grab
34247 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .062	ug/L		Annual	Grab
34320 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Annual	Grab
34320 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .33	ug/L		Annual	Grab
34371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Envrionment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2018	04/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34371 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .064	ug/L		Annual	Grab
34376 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Annual	Grab
34376 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .011	ug/L		Annual	Grab
34381 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Annual	Grab
34381 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .07	ug/L		Annual	Grab
34403 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.055	ug/L		Annual	Grab
34403 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Envrionment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2018	04/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .053	ug/L		Annual	Grab
34461 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Annual	Grab
34461 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .076	ug/L		Annual	Grab
34469 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Annual	Grab
34469 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .069	ug/L		Annual	Grab
34521 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.056	ug/L		Annual	Grab
34521 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .083	ug/L		Annual	Grab
34526 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Envrionment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2018	04/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .051	ug/L		Annual	Grab
34526 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .066	ug/L		Annual	Grab
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.055	ug/L		Annual	Grab
34556 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Phenol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .62	ug/L		Annual	Grab
34694 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .78	ug/L		Annual	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34696 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Vinyl chloride	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .47	ug/L		Annual	Grab
39175 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Envrionment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2018	04/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
tert-Butyl alcohol [TBA]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 5.9	ug/L		Annual	Grab
51008 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	CFU/100 mL		Annual	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	CFU/100 mL		Annual	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	E .54	ug/L		Annual	Grab
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3	ug/L		Annual	Grab
81551 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Dir Envrionment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	05/15/2018
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2018	05/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	302	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.21	*****	7.21	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	7.9	7.9	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.01	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .048	< .048	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 2	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/6/14/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There were two discharge events during the month but a second TSS sample could not be collected due to timing constraints. Rain was causing flooding and the Terminal needed to discharge; note that the discharge went through the retention ponds and oil/water separator.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2018	05/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.31	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health			(978)905-2100		6/14/2018
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There were two discharge events during the month but a second TSS sample could not be collected due to timing constraints. Rain was causing flooding and the Terminal needed to discharge; note that the discharge went through the retention ponds and oil/water separator.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2018	06/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	407	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7	*****	7	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	21	21	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.6	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .049	< .049	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 2	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/7/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There were two discharge events during the month but a second TSS sample could not be collected due to timing constraints. Rain was causing flooding and the Terminal needed to discharge; note that the discharge went through the retention ponds and oil/water separator.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2018	06/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.6	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		7/12/2018
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There were two discharge events during the month but a second TSS sample could not be collected due to timing constraints. Rain was causing flooding and the Terminal needed to discharge; note that the discharge went through the retention ponds and oil/water separator.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2018	06/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .24	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 30.9	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health			(978)905-2100		07/12/2018
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2018	07/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	392	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.15	*****	7.15	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	37.25	55	mg/L	1	Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.02	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .048	< .048	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 5	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/8/13/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. Gulf will evaluate BMPs to address the elevated TSS.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150
ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2018	07/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall
No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.52	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	/8/13/2018
TYPED OR PRINTED		AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. Gulf will evaluate BMPs to address the elevated TSS.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
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FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
08/01/2018	08/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	387	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.58	*****	7.58	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	12.6	13.8	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.6	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .047	< .047	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 5	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/9/13/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
08/01/2018	08/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	3.2	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	09/13/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2018	09/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	274	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	6.75	*****	7.23	SU		Twice per Month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	51.05	91	mg/L	1	Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.01	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .051	< .051	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 2	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. Facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. Gulf will evaluate BMPs to address the elevated TSS.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2018	09/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	2.16	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	0/12/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. Facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. Gulf will evaluate BMPs to address the elevated TSS.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2018	09/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 200	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	0/12/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2018	09/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY TOXICITY TESTING REPLACES OUT
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.75	SU		Annual	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Annual	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.53	SU		Annual	Grab
00400 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Annual	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ppt		Annual	Grab
00480 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Annual	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	25.5	ppt		Annual	Grab
00480 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Annual	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	231	mg/L		Annual	Grab
00500 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	30500	mg/L		Annual	Grab
00500 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	91	mg/L		Annual	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2018	09/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY TOXICITY TESTING REPLACES OUT
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	29	mg/L		Annual	Grab
00530 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.15	mg/L		Annual	Grab
00609 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.14	mg/L		Annual	Grab
00609 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.6	mg/L		Annual	Grab
00680 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.94	mg/L		Annual	Grab
00680 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
01027 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
01027 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2018	09/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY TOXICITY TESTING REPLACES OUT
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.3	ug/L		Annual	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.8	ug/L		Annual	Grab
01042 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	21.3	ug/L		Annual	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.9	ug/L		Annual	Grab
01051 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4.1	ug/L		Annual	Grab
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	11.2	ug/L		Annual	Grab
01067 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	53	ug/L		Annual	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/12/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2018	09/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY TOXICITY TESTING REPLACES OUT
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	18	ug/L		Annual	Grab
01092 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	mg/L		Annual	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .006	mg/L		Annual	Grab
50060 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
LC50 Static 48Hr Acute Mysid. Bahia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Annual	Grab
TAA3E 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Annual	Grab
LC50 Static 48Hr Acute Menidia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Annual	Grab
TAA6B 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Annual	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	0/12/2018
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2018	10/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	259	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.11	*****	7.11	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	20.3	27.7	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.03	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .051	< .051	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 5	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		1/15/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2018	10/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.73	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	1/15/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
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ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
11/01/2018	11/30/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	264	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	6.81	*****	6.81	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	37.2	62	mg/L	1	Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .5	< .5	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .049	< .049	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		2/17/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. Facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. Gulf will evaluate BMPs to address the elevated TSS. Due to lack of access to the CDX system, was not able to certify the monthly DMR until 12/17.

DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA

ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA

LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
11/01/2018	11/30/2018

DMR Mailing ZIP CODE: 02481-3705

MINOR

(SUBR E)

TREATED STORMWATER & HYDROSTATIC

External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	4.09	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	2/17/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. Facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. Gulf will evaluate BMPs to address the elevated TSS. Due to lack of access to the CDX system, was not able to certify the monthly DMR until 12/17.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2018	12/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	376	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.03	*****	7.03	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	59	66	mg/L	1	Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.5	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .7	< .7	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/15/2014	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. Facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. Gulf will evaluate BMPs to address the elevated TSS.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2018	12/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	2.98	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		11/15/2014
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. Facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. Gulf will evaluate BMPs to address the elevated TSS.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2018	12/31/2018

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 400	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	11/15/2014
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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FACILITY: GULF OIL - CHELSEA
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CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2019	01/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	412	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.15	*****	7.15	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	43	43	mg/L	1	Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.5	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	.09	.09	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	.05	.1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/2/12/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There were three discharge events during the month but a second TSS sample could not be collected due to timing constraints as required by the Permit and the need to discharge to prevent flooding at the Terminal. The facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. Gulf prepared a Corrective Action Report in accordance with the CGP and began implementation of the corrective

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2019	01/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	3.08	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		12/12/2014
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There were three discharge events during the month but a second TSS sample could not be collected due to timing constraints as required by the Permit and the need to discharge to prevent flooding at the Terminal. The facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. Gulf prepared a Corrective Action Report in accordance with the CGP and began implementation of the corrective

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
02/01/2019	02/28/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	346	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.33	*****	7.33	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	8	11	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.6	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	.5	1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .05	< .05	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 5	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/3/14/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
02/01/2019	02/28/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	2.32	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		3/14/2019
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
03/01/2019	03/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	322	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	6.99	*****	6.99	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	12	18	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.6	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	1	1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .01	< .01	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/4/12/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
03/01/2019	03/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	3.44	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	04/12/2019
TYPED OR PRINTED		AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2019	03/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 280	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		04/12/2019
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2019	04/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	331	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.87	*****	7.87	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	20	40	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .5	< .5	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .09	< .09	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/13/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2019	04/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	3.45	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	05/13/2019
TYPED OR PRINTED		AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2019	04/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia, unionized	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	mg/L		Annual	Grab
00619 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Chromium, total [as Cr]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
01034 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34010 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34030 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34200 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/13/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
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04/01/2019	04/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34200 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34205 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34205 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34220 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34230 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34230 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/13/2019	
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DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

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DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34242 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34242 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34247 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34320 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34320 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
34371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
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External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34371 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34376 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34376 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34381 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34381 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34403 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34403 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/13/2019	
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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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MA0001091	003-Y
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External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34461 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34461 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34469 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34469 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34521 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34521 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34526 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/13/2019	
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Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
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04/01/2019	04/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34526 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34556 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Phenol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 4.7	ug/L		Annual	Grab
34694 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34696 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Vinyl chloride	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
39175 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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DISCHARGE MONITORING REPORT (DMR)

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
tert-Butyl alcohol [TBA]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	ug/L		Annual	Grab
51008 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	20	CFU/100 mL		Annual	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	CFU/100 mL		Annual	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
81551 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	05/13/2019
TYPED OR PRINTED				AREA Code	NUMBER

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Form Approved
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FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
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MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2019	05/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	330	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.95	*****	7.95	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	29	35	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/6/13/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2019	05/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	2.04	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	/6/13/2019
TYPED OR PRINTED		AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2019	06/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	213	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.88	*****	7.88	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	43.5	51	mg/L	1	Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/7/12/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. In January 2019, Gulf implemented corrective actions in accordance with the CGP to address intermittent TSS exceedances. At the beginning of June, the construction activities moved to a new area of the facility, and based on the TSS results for June, additional corrective actions were implemented.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2019	06/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.93	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	7/12/2019
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The facility is currently operating under the Construction General Permit (CGP) with a job-specific SWPPP during upgrades to the secondary containment areas. In January 2019, Gulf implemented corrective actions in accordance with the CGP to address intermittent TSS exceedances. At the beginning of June, the construction activities moved to a new area of the facility, and based on the TSS results for June, additional corrective actions were implemented.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2019	06/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 400	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		07/12/2019
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2019	07/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	411	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.75	*****	7.75	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	22.5	34	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/8/14/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2019	07/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.41	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		8/14/2019
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
08/01/2019	08/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	331	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.92	*****	7.92	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	47	63	mg/L	1	Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/9/12/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. For the TSS sample collected on 8/31/2019, the laboratory had quality control issues during analysis of the sample so they re-analyzed the sample a couple days later without issues. The re-analysis result is reported on this DMR.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
08/01/2019	08/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.569	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		09/12/2019
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. For the TSS sample collected on 8/31/2019, the laboratory had quality control issues during analysis of the sample so they re-analyzed the sample a couple days later without issues. The re-analysis result is reported on this DMR.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2019	09/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	138	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	NODI E	*****	NODI E				
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI E	NODI E				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI E	NODI E				
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI E	NODI E				
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI E	NODI E				
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/15/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

In September there was only one discharge event from 9/3-9/5/19; however, the timing of the discharge did not meet the sampling requirements given in the Permit. Over 1 inch of rain had fallen and the Terminal needed to discharge to avoid flooding the facility, and they could not wait for low tide which would have been after dark. Therefore, this discharge event was not a qualifying event as defined in the Permit. No other discharge events occurred during the rest of September.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2019	09/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.399	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	0/15/2019
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

In September there was only one discharge event from 9/3-9/5/19; however, the timing of the discharge did not meet the sampling requirements given in the Permit. Over 1 inch of rain had fallen and the Terminal needed to discharge to avoid flooding the facility, and they could not wait for low tide which would have been after dark. Therefore, this discharge event was not a qualifying event as defined in the Permit. No other discharge events occurred during the rest of September.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2019	09/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	0/15/2019
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

The quarterly sampling was planned for September to coincide with the annual toxicity test sampling. In September there was only one discharge event from 9/3-9/5/19; however, the timing of the discharge did not meet the sampling requirements given in the Permit. Over 1 inch of rain had fallen and the Terminal needed to discharge to avoid flooding the facility, and they could not wait for low tide which would have been after dark. Therefore, this discharge event was not a qualifying event as defined in the Permit. No other discharge events occurred during the rest

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2019	09/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY TOXICITY TESTING REPLACES OUT
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.78	SU		Annual	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Annual	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.83	SU		Annual	Grab
00400 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Annual	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ppt		Annual	Grab
00480 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Annual	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	26.8	ppt		Annual	Grab
00480 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Annual	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	270	mg/L		Annual	Grab
00500 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	34000	mg/L		Annual	Grab
00500 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.7	mg/L		Annual	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		1/07/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

In September 2019, a qualifying discharge event did not occur and the annual toxicity test samples could not be collected. They were subsequently collected on 10/2/2019 during the next qualifying discharge event. This DMR was initially submitted on-time without data, and then revised once the 10/2/2019 data was received.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2019	09/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY TOXICITY TESTING REPLACES OUT
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	14	mg/L		Annual	Grab
00530 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.32	mg/L		Annual	Grab
00609 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.14	mg/L		Annual	Grab
00609 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5.4	mg/L		Annual	Grab
00680 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.1	mg/L		Annual	Grab
00680 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	ug/L		Annual	Grab
01027 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	ug/L		Annual	Grab
01027 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		1/07/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

In September 2019, a qualifying discharge event did not occur and the annual toxicity test samples could not be collected. They were subsequently collected on 10/2/2019 during the next qualifying discharge event. This DMR was initially submitted on-time without data, and then revised once the 10/2/2019 data was received.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2019	09/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY TOXICITY TESTING REPLACES OUT
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.6	ug/L		Annual	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	11.2	ug/L		Annual	Grab
01042 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.8	ug/L		Annual	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.4	ug/L		Annual	Grab
01051 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.8	ug/L		Annual	Grab
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	17.9	ug/L		Annual	Grab
01067 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	16	ug/L		Annual	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		1/07/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

In September 2019, a qualifying discharge event did not occur and the annual toxicity test samples could not be collected. They were subsequently collected on 10/2/2019 during the next qualifying discharge event. This DMR was initially submitted on-time without data, and then revised once the 10/2/2019 data was received.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150
ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2019	09/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY TOXICITY TESTING REPLACES OUT
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	20	ug/L		Annual	Grab
01092 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	mg/L		Annual	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	mg/L		Annual	Grab
50060 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
LC50 Static 48Hr Acute Mysid. Bahia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Annual	Grab
TAA3E 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Annual	Grab
LC50 Static 48Hr Acute Menidia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Annual	Grab
TAA6B 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Annual	Grab

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Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	1/07/2019
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

In September 2019, a qualifying discharge event did not occur and the annual toxicity test samples could not be collected. They were subsequently collected on 10/2/2019 during the next qualifying discharge event. This DMR was initially submitted on-time without data, and then revised once the 10/2/2019 data was received.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
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NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2019	10/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	212	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.78	*****	7.78	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	17.35	25	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		1/14/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2019	10/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	3.76	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		1/14/2014
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
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CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
11/01/2019	11/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	321	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.54	*****	7.54	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	80	80	mg/L	1	Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		2/12/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There were three discharge events in November, however, only one TSS sample was able to be collected during the third event for the following reasons: The first discharge event was early in the month, and because of timing, a sample was not collected and it was assumed there would be additional discharge events during the month. For the second discharge event, almost 1 inch of rain had fallen in the previous couple days and more rain was predicted, so the Terminal needed to discharge to

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
11/01/2019	11/30/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.36	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		2/12/2014
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There were three discharge events in November, however, only one TSS sample was able to be collected during the third event for the following reasons: The first discharge event was early in the month, and because of timing, a sample was not collected and it was assumed there would be additional discharge events during the month. For the second discharge event, almost 1 inch of rain had fallen in the previous couple days and more rain was predicted, so the Terminal needed to discharge to

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2019	12/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	287	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.52	*****	7.52	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	25.7	65	mg/L		Three per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/13/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2019	12/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	2.69	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	11/13/2020
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2019	12/31/2019

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 2	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 400	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	11/13/2020
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
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FACILITY: GULF OIL - CHELSEA
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CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2020	01/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	418	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.85	*****	7.85	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	29.5	46	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/2/12/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2020	01/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.16	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	12/12/2020
TYPED OR PRINTED		AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
02/01/2020	02/29/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	98	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.85	*****	7.85	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	29.5	34	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	32	64	ug/L		Twice per Month	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	25.7	46	ug/L		Twice per Month	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/3/13/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit, and the higher result for each is reported.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
02/01/2020	02/29/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.01	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		3/13/2020
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit, and the higher result for each is reported.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
03/01/2020	03/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	347	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	8.03	*****	8.03	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	14	16	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/4/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
03/01/2020	03/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.77	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	14/15/2020
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2020	03/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 2	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 400	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	04/15/2020
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2020	04/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	227	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.91	*****	7.91	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	21	34	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .5	< .5	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150
ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2020	04/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall
No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	2.27	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	05/15/2020
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2020	04/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia, unionized	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	mg/L		Annual	Grab
00619 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Chromium, total [as Cr]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
01034 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34010 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34030 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34200 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2020	04/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34200 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34205 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34205 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34220 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34230 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34230 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

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DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

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MM/DD/YYYY	MM/DD/YYYY
04/01/2020	04/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34242 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34242 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34247 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34320 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34320 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
34371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

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CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2020	04/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34371 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34376 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34376 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34381 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34381 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34403 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34403 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		05/15/2020
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
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CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
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CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2020	04/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34461 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.06	ug/L		Annual	Grab
34461 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34469 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34469 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34521 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34521 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34526 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2020	04/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34526 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	ug/L		Annual	Grab
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	ug/L		Annual	Grab
34556 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Phenol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 4.9	ug/L		Annual	Grab
34694 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34696 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Vinyl chloride	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
39175 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER

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MM/DD/YYYY	MM/DD/YYYY
04/01/2020	04/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
tert-Butyl alcohol [TBA]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	ug/L		Annual	Grab
51008 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	31	CFU/100 mL		Annual	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	CFU/100 mL		Annual	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
81551 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	05/15/2020
TYPED OR PRINTED				AREA Code	NUMBER

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Form Approved
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CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
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CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2020	05/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	302	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.2	*****	7.2	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	25.5	36	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/6/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2020	05/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.31	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	16/15/2020
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2020	06/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	532	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	8	*****	8	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	24	24	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/7/13/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

There was only one discharge event during the month, therefore, only one TSS sample was collected. Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150
ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2020	06/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall
No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.11	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	7/13/2020
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

There was only one discharge event during the month, therefore, only one TSS sample was collected. Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2020	06/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 400	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		07/13/2020
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2020	07/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	208	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.99	*****	7.99	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	31.5	35	mg/L	1	Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/8/14/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2020	07/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.09	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	/8/14/2020
TYPED OR PRINTED		AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
08/01/2020	08/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	182	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.92	*****	8.91	SU	1	Twice per Month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	21	29	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/9/14/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The pH result on 8/4/20 was above the upper Permit limit. A second sample was collected on 8/27/20 and the result was within the Permit limits. A cause for the elevated pH has not been identified. There was no construction going on at the Terminal around the time the sample was collected. City water was not being discharged into the stormwater system for any reason (i.e. hydrant flushing) - note that the City water has a high pH. Going forward, we will test the pH of the stormwater in the ponds

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
08/01/2020	08/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.44	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		09/14/2020
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The pH result on 8/4/20 was above the upper Permit limit. A second sample was collected on 8/27/20 and the result was within the Permit limits. A cause for the elevated pH has not been identified. There was no construction going on at the Terminal around the time the sample was collected. City water was not being discharged into the stormwater system for any reason (i.e. hydrant flushing) - note that the City water has a high pH. Going forward, we will test the pH of the stormwater in the ponds

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2020	09/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	293	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	8.05	*****	8.05	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	6.7	6.7	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .09	< .09	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one stormwater discharge event during the month, therefore, only one TSS sample was able to be collected during the month.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2020	09/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.103	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		0/15/2020
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There was only one stormwater discharge event during the month, therefore, only one TSS sample was able to be collected during the month.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2020	09/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 2	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 400	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health			(978)905-2100		0/15/2020
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2020	09/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY TOXICITY TESTING REPLACES OUT
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.05	SU		Annual	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Annual	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.79	SU		Annual	Grab
00400 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	SU		Annual	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.9	ppt		Annual	Grab
00480 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Annual	Grab
Salinity	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	30.7	ppt		Annual	Grab
00480 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	g/g		Annual	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	920	mg/L		Annual	Grab
00500 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Solids, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	37000	mg/L		Annual	Grab
00500 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.7	mg/L		Annual	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA

ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA

LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2020	09/30/2020

DMR Mailing ZIP CODE: 02481-3705

MINOR

(SUBR E)

YEARLY TOXICITY TESTING REPLACES OUT

External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	16	mg/L		Annual	Grab
00530 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.98	mg/L		Annual	Grab
00609 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Ammonia nitrogen, total, [as N] 30 day	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.14	mg/L		Annual	Grab
00609 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	11.2	mg/L		Annual	Grab
00680 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Carbon, tot organic [TOC]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.3	mg/L		Annual	Grab
00680 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	ug/L		Annual	Grab
01027 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Cadmium, total [as Cd]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	ug/L		Annual	Grab
01027 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

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ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA

LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2020	09/30/2020

DMR Mailing ZIP CODE: 02481-3705

MINOR

(SUBR E)

YEARLY TOXICITY TESTING REPLACES OUT

External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.6	ug/L		Annual	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8	ug/L		Annual	Grab
01042 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.3	ug/L		Annual	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	ug/L		Annual	Grab
01051 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.3	ug/L		Annual	Grab
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Nickel, total [as Ni]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .2	ug/L		Annual	Grab
01067 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8	ug/L		Annual	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-R
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
09/01/2020	09/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY TOXICITY TESTING REPLACES OUT
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	14	ug/L		Annual	Grab
01092 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.07	mg/L		Annual	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.05	mg/L		Annual	Grab
50060 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
LC50 Static 48Hr Acute Mysid. Bahia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Annual	Grab
TAA3E 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Annual	Grab
LC50 Static 48Hr Acute Menidia	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	%		Annual	Grab
TAA6B 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AV MN	*****	*****	%		Annual	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		0/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2020	10/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	221	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	8.06	*****	8.06	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	7.35	10	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .02	< .02	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		1/13/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2020	10/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	2.65	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	1/13/2020
TYPED OR PRINTED		AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
11/01/2020	11/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	176	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.76	*****	7.76	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	17	17	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .02	< .02	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		2/15/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There were two discharge events in November, however, only one TSS sample was able to be collected during the second event for the following reasons: For the first discharge event, over 1.5 inches of rain had fallen the previous day so the Terminal needed to discharge to avoid flooding the facility, but the timing of the discharge was outside of the parameters set in the NPDES Permit for a qualifying event. The monthly sample was collected during the second discharge event on 11/29/2020.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
11/01/2020	11/30/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.51	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Dir. Environ, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	2/15/2020
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. There were two discharge events in November, however, only one TSS sample was able to be collected during the second event for the following reasons: For the first discharge event, over 1.5 inches of rain had fallen the previous day so the Terminal needed to discharge to avoid flooding the facility, but the timing of the discharge was outside of the parameters set in the NPDES Permit for a qualifying event. The monthly sample was collected during the second discharge event on 11/29/2020.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2020	12/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	42	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.77	*****	7.77	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	26.5	34	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .02	< .02	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		11/11/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/01/2020	12/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.45	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		11/11/2021
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2020	12/31/2020

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 2	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 400	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
Christopher Gill/ Dir Environment, Safety, Occupat. Health			(978)905-2100		11/11/2021
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2021	01/31/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	86	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.68	*****	7.68	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 3.3	< 3.3	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .02	< .02	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupat. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/2/11/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

There was only one discharge event during the month, therefore, only one TSS sample was collected. Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2021	01/31/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.6	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		12/11/2021
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

There was only one discharge event during the month, therefore, only one TSS sample was collected. Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
02/01/2021	02/28/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	92	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.74	*****	7.74	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	10.5	17	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .02	< .02	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/3/12/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. Attached is a non-compliance report for a hydrostatic test discharge event that occurred at the Terminal on 2/5/2021.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
02/01/2021	02/28/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.82	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE	DATE
Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	3/12/2021
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. Attached is a non-compliance report for a hydrostatic test discharge event that occurred at the Terminal on 2/5/2021.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
03/01/2021	03/31/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	138	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.66	*****	7.66	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	3	6	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .02	< .02	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/4/13/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
03/01/2021	03/31/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.81	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		04/13/2021
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2021	03/31/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 2	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 400	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE		DATE
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			(978)905-2100		04/13/2021
		TYPED OR PRINTED			AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2021	04/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	126	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	8.36	*****	8.36	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	21	21	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .5	< .5	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .1	< .1	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/10/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

There was only one discharge event during the month, therefore, only one TSS sample was collected. Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2021	04/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	.83	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden	TELEPHONE	DATE
Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	05/10/2021
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

There was only one discharge event during the month, therefore, only one TSS sample was collected. Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2021	04/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia, unionized	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	mg/L		Annual	Grab
00619 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Annual	Grab
Chromium, total [as Cr]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4	ug/L		Annual	Grab
01034 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34010 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34030 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34200 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/10/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2021	04/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Acenaphthylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34200 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34205 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Acenaphthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34205 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34220 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34230 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[b]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34230 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/10/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2021	04/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34242 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[k]fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34242 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34247 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34320 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Chrysene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34320 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
34371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/10/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2021	04/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34371 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34376 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluoranthene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34376 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34381 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Fluorene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34381 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34403 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Indeno[1,2,3-cd]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34403 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/10/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2021	04/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34461 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Phenanthrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34461 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34469 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34469 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .1	ug/L		Annual	Grab
34521 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[ghi]perylene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .09	ug/L		Annual	Grab
34521 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34526 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/10/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2021	04/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzo[a]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	ug/L		Annual	Grab
34526 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .02	ug/L		Annual	Grab
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Dibenz[a,h]anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.04	ug/L		Annual	Grab
34556 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Phenol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 4.9	ug/L		Annual	Grab
34694 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
34696 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Vinyl chloride	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
39175 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/5/10/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-Y
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2021	04/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
YEARLY EFFLUENT/RECEIVING WATER POL
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
tert-Butyl alcohol [TBA]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	ug/L		Annual	Grab
51008 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	41	CFU/100 mL		Annual	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	CFU/100 mL		Annual	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .5	ug/L		Annual	Grab
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Annual	Grab
81551 RW 0 Receiving Water	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Annual	Grab

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Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	05/10/2021
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2021	05/31/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	111	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	8.14	*****	8.14	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	13	13	mg/L		Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .02	< .02	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

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Christopher Gill/ Dir. Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/6/15/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit. The first discharge event was early in the month, and because of timing, a sample was not collected and it was assumed there would be additional discharge events during the month. The monthly sample was collected during the next discharge event on 5/29/2021. Another discharge event did not occur during the month to collect the second TSS sample.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2021	05/31/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.73	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Dir. Environment, Safety, Occupa. Health			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	/6/15/2021
TYPED OR PRINTED		AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2021	06/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****	128	gal/min	*****	*****	*****	*****		When Discharging	Estimate
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	800 DAILY MX	gal/min	*****	*****	*****	*****		When Discharging	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	8.02	*****	8.02	SU		Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		Monthly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.35	4.7	mg/L		Twice per Month	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 MO AVG	100 DAILY MX	mg/L		Twice per Month	Grab
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L		Monthly	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	15 DAILY MX	mg/L		Monthly	Grab
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 1	< 1	ug/L		Monthly	Grab
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	51 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Benzo[a]pyrene	SAMPLE MEASUREMENT	*****	*****	*****	*****	< .02	< .02	ug/L		Monthly	Grab
34247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI B	< 1	ug/L		Monthly	Grab
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	100 MO AVG	Req. Mon. DAILY MX	ug/L		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Jennifer Hadden		TELEPHONE		DATE	
Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100		/7/15/2021	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Naphthalene is reported as both a VOC and SVOC per the Permit

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME: GULF OIL - CHELSEA
ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150
FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

MA0001091	003-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2021	06/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
TREATED STORMWATER & HYDROSTATIC
External Outfall

No Discharge ☐

ATTN: Christopher Gill, Terminal Mgr

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, total	SAMPLE MEASUREMENT	*****	1.45	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
82220 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/mo	*****	*****	*****	*****		When Discharging	Meter
Discharge event observation [Visual Monitoring]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	occur/mo		When Discharging	Occurs
84165 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	occur/mo		When Discharging	Occurs

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Christopher Gill/ Dir Environment, Safety, Occupa. Health			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(978)905-2100	7/15/2021
TYPED OR PRINTED		AREA Code		NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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DISCHARGE MONITORING REPORT (DMR)

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ADDRESS: 281 EASTERN AVE
CHELSEA, MA 02150

FACILITY: GULF OIL - CHELSEA
LOCATION: 281 EASTERN AVE
CHELSEA, MA 02150

ATTN: Christopher Gill, Terminal Mgr

MA0001091	003-O
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2021	06/30/2021

DMR Mailing ZIP CODE: 02481-3705
MINOR
(SUBR E)
QUARTERLY OXYGENATE MONITORING OL
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Methyl tert-butyl ether [MTBE]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1	ug/L		Quarterly	Grab
22417 GW 0 Groundwater	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab
Ethanol	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 400	ug/L		Quarterly	Grab
77004 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	Grab

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Christopher Gill/ Dir Environment, Safety, Occupa. Health		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(978)905-2100	17/15/2021
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)